(a) whether Government is aware that highest number of unsafe abortions in the world are done in India;

(b) whether it is also a fact that a large number of maternal deaths are caused in the country on account of unsafe abortions;

(c) whether Government is also aware that unsafe abortions have various serious implications *i.e.* life-long disabilities and reproductive tract infection etc.;

(d) whether Government has formulated some stringent action plan to control this menace; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) There is no recent officially published data which has been shared with the Government of India to corroborate the statement that the highest numbers of unsafe abortions in the world are carried out in India.

As per the last survey report of the Registrar General of India, Sample Registration System, titled "Maternal Mortality in India: 1997-2003 trends, causes and risk factors", published in the year 2006, 8% of the maternal deaths in the country are caused by abortions.

Unsafe abortions may have certain serious implications for women and lead to life long disabilities like the necessity of hysterectomy, conditions like vesicovaginal fistula, reproductive tract infections (RTIs), chronic pelvic inflammatory disease (PID), and infertility etc.

Under the National Rural Health Mission and the Reproductive and Child Health Programme Phase II within its umbrella, one of the key strategies to reduce the maternal mortality in the country is the provision of safe, affordable, accessible and acceptable abortion services to women in the public and private sector health facilities, as per the mandate of the Amended Medical Termination of Pregnancy (MTP) 2002 and MTP Rules and Regulations 2003.

Protection of migrants from HIV infection

67. MS. MABEL REBELLO:
SHRI B. J. PANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased state:

(a) whether it is proposed to map out high-risk migration corridors in the country to create safe working environment to protect migrants and their families from getting infected with HIV;

(b) if so, the details thereof;

(c) whether it is a fact that abysmal health infrastructure in the backward States is making the treatment and care difficult; and

(d) if so, what is the action plan of Government to develop better health infrastructure in Orissa, Jharkhand and other backward States to control this menace?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir.

(b) NACO is conducting the mapping of high risk groups and migrants in 17 States across India. The mapping process is complete and its re-validation is under way. The proposed scale up of migrant intervention in States across India is based on this mapping exercise.

(c) and (d) Under NACP-III, the Care Support and Treatment of HIV infected person is provided through ART centres and community care centres. The Statewise details of facilities established under NACP-III for HIV care is at the Statement.

Statement

State-wise status of facilities under National AIDS Control Programme as on December 2008

Status of facilities under National AIDS Control Programme

(December, 2007)

State/UT/ Mun. Corp.	Sentinel Sites	Blood Banks	STD Clinics	ICTC	ART Centres	CCC	Targeted Interventions
1	2	3	4	5	6	7	8
All India	1215	1093	845	4817	197	208	1232
A & N Islands	5	2	1	13	0	0	0
Ahmedabad	0	0	5	0	0	0	14
Andhra Pradesh	72	92	85	677	28	39	66
Arunachal Pradesh	18	12	14	35	1	0	19
Assam	43	31	23	70	3	3	63
Bihar	65	47	42	207	4	5	28
Chandigarh	8	4	3	9	1	1	13
Chennai	0	0	11	74	0	0	26
Chhattisgarh	21	14	18	90	1	3	27
D & N Haveli	1	1	0	2	0	0	3
Daman & Diu	2	1	0	3	0	0	3
Delhi	20	19	8	89	9	7	65
Goa	7	3	4	11	1	2	19
Gujarat	51	65	36	269	7	6	94
Haryana	30	17	24	85	1	1	32
Himachal Pradesh	20	13	14	32	1	1	21

1	2	3	4	5	6	7	8
J & K	24	20	17	24	2	0	6
Jharkhand	41	21	17	46	2	2	26
Karnataka	76	64	31	561	27	28	40
Kerala	23	45	18	103	5	6	47
Lakshadweep	3	1	1	0	0	0	0
Madhya Pradesh	54	59	49	103	3	2	66
Maharashtra	114	96	43	604	37	28	42
Manipur	24	3	10	54	6	6	57
Meghalaya	10	5	7	11	1	0	6
Mizoram	17	8	7	20	1	2	42
Mumbai (MC)	0	0	23	0	0	0	36
Nagaland	29	8	11	65	4	4	38
Orissa	54	56	19	129	3	4	44
Pondicherry	10	5	4	10	1	1	0
Punjab	32	51	17	57	3	3	24
Rajasthan	46	43	47	178	4	4	46
Sikkim	7	2	5	13	1	0	8
Tamil Nadu	109	94	95	783	27	35	35
Tripura	10	6	5	4	1	2	16
Uttar Pradesh	98	68	79	205	7	5	93
Uttarakhand	16	13	9	39	1	0	4
West Bengal	55	62	44	141	4	8	63

Protection of participants of clinical trials

68. SHRI MAHENDRA MOHAN:
SHRIMATI SHOBHANA BHARTIA:
SHRIMATI MOHSINA KIDWAI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Indian Council of Medical Research (ICMR) has recently drafted guidelines for compensation to participants for research related injury in the country;

(b) if so, the details thereof;

(c) whether AIIMS has been doing clinical trials using stem cells as well and propose to start a new batch of trials for the patients of Parkinsons disease shortly; and

(d) if so, how Government is going to protect the participants of clinical trials?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The Indian Council of Medical Research (ICMR), Forum for